

## Application Data Sheet

### **Application Information**

**Application number::**

**Filing Date::**

**Application Type::**

Regular

**Subject Matter::**

Utility

**Suggested classification::**

**Suggested Group Art Unit::**

**CD-ROM or CD-R?::**

None

**Computer Readable Form (CRF)?::**

No

**Title::**

A PREVENTIVE AGENT FOR VASCULITIS

**Attorney Docket Number::**

053466-0417

**Request for Early Publication?::**

No

**Request for Non-Publication?::**

No

**Suggested Drawing Figure::**

**Total Drawing Sheets::**

6

**Small Entity?::**

No

**Petition included?::**

No

**Secrecy Order in Parent Appl.?::**

No

### **Applicant Information**

**Applicant Authority Type::**

Inventor

**Primary Citizenship Country::**

Japan

**Status::**

Full Capacity

**Given Name::**

Norihiro

**Family Name::**

NISHIMOTO

**City of Residence::**

Minoh-shi

**Country of Residence::**

Japan

**Street of mailing address::**

4-6-9-804, Nyoidani

**City of mailing address::**

Minoh-shi

**State or Province of mailing address::**

Osaka

**Country of mailing address::**

Japan

**Postal or Zip Code of mailing address::**

562-0011

**Applicant Authority Type::** Inventor  
**Primary Citizenship Country::** Japan  
**Status::** Full Capacity  
**Given Name::** Tadamitsu  
**Family Name::** KISHIMOTO  
**City of Residence::** Tondabayashi-shi  
**Country of Residence::** Japan  
**Street of mailing address::** 3-5-31, Nakanocho  
**City of mailing address::** Tondabayashi-shi  
**State or Province of mailing address::** Osaka  
**Country of mailing address::** Japan  
**Postal or Zip Code of mailing address::** 584-0021

**Applicant Authority Type::** Inventor  
**Primary Citizenship Country::** Japan  
**Status::** Full Capacity  
**Given Name::** Hideko  
**Family Name::** NAKAHARA  
**City of Residence::** Osaka-shi  
**Country of Residence::** Japan  
**Street of mailing address::** 3-10-1-504 Abenosuji  
**City of mailing address::** Osaka-shi  
**State or Province of mailing address::** Osaka  
**Country of mailing address::** Japan  
**Postal or Zip Code of mailing address::** 545-0052

#### **Correspondence Information**

**Correspondence Customer Number::** 22428  
**E-Mail address::** PTOMailWashington@foley.com

#### **Representative Information**

<b>Representative Customer Number::</b>	22428	
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**Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	National Stage of	PCT/JP2004/019463	12/17/2004

**Foreign Priority Information**

Country::	Application number::	Filing Date::	Priority Claimed::
Japan	2003-423517	12/19/2003	Yes

**Assignee Information****Assignee Name::****CHUGAI SEIYAKU KABUSHIKI KAISHA**